



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2022

1. Corporate ID No. 001693099

2. Name of Corporation Helping Hands Grateful Hearts, Inc.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Principal Office Address

No. and Street: 31 KENYON AVENUE
City or Town: WAKEFIELD State: RI Zip: 02879 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

THE CORPORATION SHALL BE OPERATED EXCLUSIVELY FOR CHARITABLE PURPOSES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE FOR THE PURPOSES OF PROVIDING HOUSING AND COMMUNITY SUPPORT TO LESS FORTUNATE PERSONS AROUND THE WORLD.

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
DIRECTOR	KEVIN S. JOHNSON	624 HIGHWAY 139 DANDRIDGE, TN 37725 USA
DIRECTOR	CAMERON JOHNSON	624 HIGHWAY 139 DANDRIDGE, TN 37725 USA
DIRECTOR	SUSAN C. JOHNSON	1 GULL ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	KAITLIN JOHNSON	24 PROVIDENCE RD MORTON, PA 19070 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

SUSAN C. JOHNSON 11 KENYON AVENUE WAKEFIELD , RI 02879

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 27 Day of April, 2022 at 10:33:15 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By SUSAN JOHNSON
Signature of Authorized Person

Form No. 631
Revised 09/07

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